

## Application Data Sheet

### Application Information

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD\_R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission:: No  
Computer Readable Form (CRF)?:: No  
Title:: Gastric Bypass Devices and Methods  
Attorney Docket Number:: 14283.0013USWO  
Request For Early Publication:: No  
Request For Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 4  
Small Entity:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Malaysia  
Status:: Full Capacity  
Given Name:: Elizabeth  
Middle Name::  
Family Name:: RAJAN  
Name Suffix::  
City of Residence:: Rochester  
State or Province of Residence:: Minnesota  
Country of Residence:: United States of America  
Street of mailing address:: 4483 Meadow Lakes Drive NW  
City of mailing address:: Rochester  
State or Province of mailing address:: Minnesota  
Country of mailing address:: United States of America  
Postal or Zip Code of mailing address:: 55901

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States of America  
Status:: Full Capacity  
Given Name:: Christopher  
Middle Name:: J.  
Family Name:: GOSTOUT  
Name Suffix::  
City of Residence:: Rochester  
State or Province of Residence:: Minnesota  
Country of Residence:: United States of America  
Street of mailing address:: 182 Evergreen Drive N.E.

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City of mailing address:: Rochester  
State or Province of mailing address:: Minnesota  
Country of mailing address:: United States of America  
Postal or Zip Code of mailing address:: 55906

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States of America  
Status:: Full Capacity  
Given Name:: Kevin  
Middle Name:: E.  
Family Name:: BENNET  
Name Suffix::  
City of Residence:: Rochester  
State or Province of Residence:: Minnesota  
Country of Residence:: United States of America  
Street of mailing address:: 819 4th Street SW  
City of mailing address:: Rochester  
State or Province of mailing address:: Minnesota  
Country of mailing address:: United States of America  
Postal or Zip Code of mailing address:: 55902

### Correspondence Information

Correspondence Customer Number:: 23552

### Representative Information

Representative Customer Number::	23552
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## Domestic Priority Information

Application::	Continuation Type::	Parent Application::	Parent Filing Date::
This is a	National Stage of	PCT/US2005/005782	02/24/06
PCT/US2005/005782	is a Non-provisional of	60/547,483	02/25/04

## Assignee Information

Assignee Name:: Mayo Foundation for Medical Education  
and Research  
Street of mailing address:: 200 First Street Southwest  
City of mailing address:: Rochester  
State or Province of mailing address:: Minnesota  
Country of mailing address:: United States of America  
Postal or Zip Code of mailing address:: 55905

Initial      08/21/06